

Work Order ID 105849

\*105849\*

Page 1

August-22-13 7:54:44 AM

Item ID: D212-664-201

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Aft Crosstube - High

Start Date: 8/22/13 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 9/05/13 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan: MLJ Date: 13-08-22 Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
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D212-664-241	Rev D (DEO)
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DSI9563	B
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100	DOCUMENT CONTROL	0.00	DAS	27	9-89				
*100*									
DC	Memo <u>11.10.</u>	0.00	13	9	10				
Document Control	Photocopy bluefile and create labels as per PPP D212-664-201		CHG005						

1 13-08-22 139-9

110	Pick Kit	0.00							
*110*	Packaging								
Packaging	Memo	0.00							
Packaging									

TW 13-08-22

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: John Date: 13/09/20QA Closed: OK Date: 13/9/20

Work Order: <u>105849</u>	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input checked="" type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>			
Part No. <u>D212-604-201</u>		Skid-tube <input type="checkbox"/> Machining <input type="checkbox"/> Thermoforming <input type="checkbox"/> Large Fab <input type="checkbox"/>	Crosstube <input checked="" type="checkbox"/> Small-Fab <input type="checkbox"/> Finishing <input type="checkbox"/> Composite <input type="checkbox"/>	Water Jet <input type="checkbox"/> Prod. Eng. Coor. <input type="checkbox"/> Rec/Store/Packaging <input type="checkbox"/> Supplier <input type="checkbox"/>	Engineering <input type="checkbox"/> Quality <input type="checkbox"/> Other <input type="checkbox"/>
NCR No. <u>13-3056</u>					

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									
	<u>13/09/20</u>	<u>120</u>	<u>1</u>	<u>CRUSHING IS OVER tolerance.</u>	<u>CP</u> <u>13/09/20</u>	<u>Acceptable, PER ATTACHED SR.</u>	<u>CP</u> <u>13/09/20</u>	<u>DAS 16 9-89</u> <u>Block 26</u>	<u>DAS 16 9-89</u> <u>Block 26</u>

## FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input checked="" type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Work Order ID 105849

**\*105849\***

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August-22-13 7:54:44 AM

Item ID: D212-664-201 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Aft Crosstube - High  
 Start Date: 8/22/13 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 9/05/13 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
120	BENDING MACHINE - CROSSTUBES	0.00							
<b>*120*</b>									
CNC Bend 2	Memo	0.00							
CNC Alpha 160 Bender	Bend tube as per Dwg D212-664-241 using CNC bender program 212- aft								
130	QC15- Crosstube Dimensional Check	0.00							
<b>*130*</b>									
QC	Memo	0.00							
Quality Control									

*JW* 13-08-26

**DAS**  
**16**  
**9-89** 13/08/26

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td style="border: none;">Skid-tube <input type="checkbox"/></td> <td style="border: none;">Crosstube <input type="checkbox"/></td> <td style="border: none;">Water Jet <input type="checkbox"/></td> <td style="border: none;">Engineering <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Machining <input type="checkbox"/></td> <td style="border: none;">Small Fab <input type="checkbox"/></td> <td style="border: none;">Prod. Eng. Coor. <input type="checkbox"/></td> <td style="border: none;">Quality <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Thermoforming <input type="checkbox"/></td> <td style="border: none;">Finishing <input type="checkbox"/></td> <td style="border: none;">Rec/Store/Packaging <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Large Fab <input type="checkbox"/></td> <td style="border: none;">Composite <input type="checkbox"/></td> <td style="border: none;">Supplier <input type="checkbox"/></td> <td style="border: none;"></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
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☐ Ovalized  
☐ Over/Under tolerance  
☐ Part Incorrect  
☐ Part Lost/Missing  
☐ Part Moved  
☐ Positioned Wrong  
☐ Power Loss/Surge

☐ Pressure/Forced  
☐ Temperature/Cure  
☐ Weld  
☐ Wrong Stock Pulled  
☐ Other

# Work Order ID 105849

August-22-13 7:54:44 AM

**\*105849\***

Page 3

Item ID: D212-664-201 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Aft Crosstube - High  
 Start Date: 8/22/13 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 9/05/13 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
140	Crosstubes	0.00							
<b>*140*</b>									
Crosstubes	<b>Memo</b>	0.00							
Crosstubes	1-Drill pilot holes in tube as per Dwg D212-664-241 using drill Jig DT8550, DT8551, drill table DT8577 and locate tower holes #8 as per QSI0010.								
	2-Ream hole to finish size in tube as per Dwg D212-664-241 using drill Jig DT8550 & DT8551. Check dimensions between holes, both sides on both cuffs, to ensure alignment with saddle holes.								
	3-Scribe part # and batch # using vibrating stylus as per Dwg D212-664-241								
	4- ***WEAR LATEX GLOVES HANDLIND CROSSTUBE.*** Deburr & Inspect for surface damage. Repair damage within limits as per Dwg D212-664-241								
150	QC5- Inspect part completeness to step on W/O	0.00							
<b>*150*</b>									
QC	<b>Memo</b>	0.00							
Quality Control	***WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.***								

DAS  
27  
9-89

13.8.30

13-08-26

13-08-27

1

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>					
Part No. _____		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>		
NCR No. _____		Machining <input type="checkbox"/>	Small-Fab <input type="checkbox"/>	Prod-Eng-Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>		
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>		
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>			

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Work Order ID 105849

August-22-13 7:54:44 AM

**\*105849\***

Page 4

Item ID: D212-664-201 Accept **\*N900040100\*** Setup Start **\*NS1\***  
 Revision ID: Stop **\*NS2\***  
 Item Name: Aft Crosstube - High  
 Start Date: 8/22/13 Start Qty: 1.00 **\*1\*** Cust Item ID:  
 Required Date: 9/05/13 Req'd Qty: 1.00 **\*1\*** Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start **\*NR1\***  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
160		0.00							
<b>*160*</b>									
HandFXtube	Memo	0.00							
Hand Finishing Crosstubes	***WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.***								
	1- CLEAN CROSSTUBE WITH WASH'N WIPE								
180	Outsource process - NDT per QSI038 4.1	0.00							
<b>*180*</b>									
Outsource2	Memo	0.00							
Outsource process - NDT	***WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.***								
	Liquid Penetrant Inspection as per QSI 038								
	Issue P/O: <u>21114</u>								
	LPI as per ASTM 1417 Level 2								
	Attach copy of NDT results to work order								
190	Receive & Inspect for Damage & Mat'l Certs	0.00							
<b>*190*</b>	Packaging								
Packaging	Memo	0.00							
Packaging	***WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.***								
	Ensure copy of NDT results attached to work order.								

13-8-29

13-08-28

13/8/25

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Skid-tube <input type="checkbox"/></td> <td style="width: 25%;">Crosstube <input type="checkbox"/></td> <td style="width: 25%;">Water Jet <input type="checkbox"/></td> <td style="width: 25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coor. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data									
Equip/Tooling									
Operator									
Material									
Setup									
Other									
Process									
Supplier									
Training									
Unapproved									

**FAULT CATEGORY**

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
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<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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# Work Order ID 105849

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August-22-13 7:54:44 AM

Item ID: D212-664-201

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Aft Crosstube - High

Start Date: 8/22/13 Start Qty: 1.00

**\*1\***

Cust Item ID:

Required Date: 9/05/13 Req'd Qty: 1.00

**\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
200 <b>*200*</b> QC Quality Control	QC5- Inspect part completeness to step on W/O  Memo ***WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.***  Inspect for damage & ensure results are as per Dwg D212-664-241	0.00  0.00	DAS 27 9-89 13.8.29			1			
204 <b>*204*</b> HandFXtube Hand Finishing Crosstubes	Crosstubes Chemical Conversion  Memo ***WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.***  1- PRESSURE WASH AND THEN USE WASH'N WIPE TO CLEAN CROSSTUBE BEFORE CHEMICAL CONVERSION	0.00  0.00				1	0	0	13-8-28 29
206 <b>*206*</b> QC Quality Control	QC7-Inspect Chemical Conversion Coat  Memo ***WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE.***	0.00  0.00	DAS 27 9-89 13.8.29			1			

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td style="border: none;">Skid-tube <input type="checkbox"/></td> <td style="border: none;">Crosstube <input type="checkbox"/></td> <td style="border: none;">Water Jet <input type="checkbox"/></td> <td style="border: none;">Engineering <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Machining <input type="checkbox"/></td> <td style="border: none;">Small Fab <input type="checkbox"/></td> <td style="border: none;">Prod-Eng-Coord: <input type="checkbox"/></td> <td style="border: none;">Quality <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Thermoforming <input type="checkbox"/></td> <td style="border: none;">Finishing <input type="checkbox"/></td> <td style="border: none;">Rec/Store/Packaging <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Large Fab <input type="checkbox"/></td> <td style="border: none;">Composite <input type="checkbox"/></td> <td style="border: none;">Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod-Eng-Coord: <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod-Eng-Coord: <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
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Work Order ID 105849

\*105849\*

Page 6

August-22-13 7:54:44 AM

Item ID: D212-664-201

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Aft Crosstube - High

Start Date: 8/22/13 Start Qty: 1.00

\*1\*

Cust Item ID:

Required Date: 9/05/13 Req'd Qty: 1.00

\*1\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
210	Spray Painting per QSI005 4.2	0.00							
*210*	SprayPaint					1	0	0	AS
Spray Painting	Memo	0.00							13-9-1

\*\*\* WEAR LATEX GLOVES WHEN HANDLING CROSSTUBE\*\*\*

1-Prime inside and outside crosstube as per QSI 005 4.2

PRIME BATCH: 126195

Start Time: 9:00

Finish Time: 9:45

\*\*\*MASK UNDERSIDE OF CROSSTUBE AS SHOWN ON DWG DEO\*\*\*

2-Paint outside crosstube with White Imron as per QSI 005 4.2

PAINT BATCH: 126556

Start Time: 6:00

Finish Time: 6:45

3- Remove masking and apply matte clear coat as per dwg DEO

CLEAR BATCH: 120773

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>			
Part No. _____		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. _____		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

Landing Gear	General	
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Work Order ID 105849

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**\*105849\***

Page 7

Item ID: D212-664-201

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Aft Crosstube - High

Start Date: 8/22/13 Start Qty: 1.00 **\*1\***

Cust Item ID:

Required Date: 9/05/13 Req'd Qty: 1.00 **\*1\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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220

QC14- Inspect Spray Paint

0.00

**\*220\***

QC

Memo

0.00

Quality Control

Then, Wrap in plastic bag to protect from scratches

1 0 13-09-01

230

0.00

**\*230\***

Crosstubes

Crosstubes

Memo

0.00

Crosstubes

1-Abraide mating surfaces of support and crosstube with 180 grit sandpaper, clean the area with MEK or equivalent as per dwg

2-Install supports with Proseal 890 per D212-664-241 (DEO) and QSI 015

A/R Proseal 890 Batch: 126010  
EXP: 2/14

3-Install supports clamps Using Dt9565 as per Dwg D212-664-241

(DEO), Torque to 80-100 IN-LBS.

PROSEAL CURE TIME 72 HOURS:

Start: 4:40

Finish: 5:20

1 0 0 13-9-1

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>					
Part No. _____		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>		
NCR No. _____		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>		
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>		
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>			

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

Landing Gear	General		
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain	<input type="checkbox"/> Ovalized
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware	<input type="checkbox"/> Over/Under tolerance
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete	<input type="checkbox"/> Part Incorrect
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear	<input type="checkbox"/> Part Lost/Missing
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance	<input type="checkbox"/> Part Moved
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Mislabeled	<input type="checkbox"/> Positioned Wrong
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread	<input type="checkbox"/> Power Loss/Surge
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset	<input type="checkbox"/> Pressure/Forced
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration	<input type="checkbox"/> Temperature/Cure
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Weld
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Wrong Stock Pulled
			<input type="checkbox"/> Other

# Work Order ID 105849

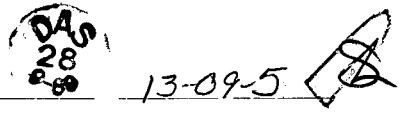
\*105849\*

Page 8

August-22-13 7:54:44 AM

Item ID: D212-664-201 Accept \*N900040100\* Setup Start \*NS1\*  
 Revision ID: Stop \*NS2\*  
 Item Name: Aft Crosstube - High  
 Start Date: 8/22/13 Start Qty: 1.00 \*1\* Cust Item ID:  
 Required Date: 9/05/13 Req'd Qty: 1.00 \*1\* Customer:  
 Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_ Run Start \*NR1\*  
 QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_ Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
240 *240* QC Quality Control	QC5- Inspect part completeness to step on W/O  Memo ***RE-CHECK TORCQUE ON CLAMP AFTER PROSEAL HAS CURED FOR 72HOURS AS PER DWG.***	0.00 0.00		DAS 27 9-89 13-9-5		J			
250 *250* Packaging Packaging	Pick Kit  Memo	0.00 0.00				IX		13-09-5	
260 *260* QC Quality Control	QC4- 100% Inspect kits for completeness  Memo	0.00 0.00		DAS 27 9-89 13 9 10		J			

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
---	---	---

<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	
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# Work Order ID 105849

\*105849\*

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Item ID: D212-664-201

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Aft Crosstube - High

Start Date: 8/22/13 Start Qty: 1.00 \*1\*

Cust Item ID:

Required Date: 9/05/13 Req'd Qty: 1.00 \*1\*

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_ Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start \*NR1\*

QC: \_\_\_\_\_ Date: \_\_\_\_\_ SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop \*NR2\*

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
270		0.00							
*270*	Packaging								
Packaging	Memo	0.00							
Packaging	Identify and pack for shipping as per PPP D212-664-201								
280		0.00							
*280*	QC21- Final Inspection - Work Order Release								
QC	Memo	0.00							
Quality Control									



13/9/18

13-09-17

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td style="border: none;">Skid-tube <input type="checkbox"/></td> <td style="border: none;">Crosstube <input type="checkbox"/></td> <td style="border: none;">Water Jet <input type="checkbox"/></td> <td style="border: none;">Engineering <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Machining <input type="checkbox"/></td> <td style="border: none;">Small Fab <input type="checkbox"/></td> <td style="border: none;">Prod. Eng. Coord. <input type="checkbox"/></td> <td style="border: none;">Quality <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Thermoforming <input type="checkbox"/></td> <td style="border: none;">Finishing <input type="checkbox"/></td> <td style="border: none;">Rec/Store/Packaging <input type="checkbox"/></td> <td style="border: none;">Other <input type="checkbox"/></td> </tr> <tr> <td style="border: none;">Large Fab <input type="checkbox"/></td> <td style="border: none;">Composite <input type="checkbox"/></td> <td style="border: none;">Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
---	---	---

☐ Ovalized  
☐ Over/Under tolerance  
☐ Part Incorrect  
☐ Part Lost/Missing  
☐ Part Moved  
☐ Positioned Wrong  
☐ Power Loss/Surge

☐ Pressure/Forced  
☐ Temperature/Cure  
☐ Weld  
☐ Wrong Stock Pulled  
☐ Other

# Picklist Print

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Page 1

Work Order ID: 105849

\*105849\*

Parent Item: D212-664-201

\*D212-664-201\*

Parent Item Name: Aft Crosstube - High

Start Date: 8/22/13

Required Date: 9/05/13

Start Qty: 1.00

Required Qty: 1.00

Comments: IPP Rev:E04.02.16ReformatK/DS  
IPP Rev:F 06-03-29 Remove Coments on Pick List JLM  
IPP Rev:G 07-04-30 As per Rev C JLM  
IPP Rev:H 08-05-22 up date Qty of rubber cushion DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D212-664- 201TRNRevC		Manufactured	No			110	Each	0.0000	1	1		13-08-22	
*D212-664-201TRNRevC*									**				
Crosstube Turning Detail													
D3595-063-530		Manufactured	No			230	Each	186.0000	2	2			
*D3595-063-530*									**		13-9-1		
Rubber Cushion													

Location	Loc Qty	Loc Code
FG	5	
82656	5	
LG	20	
103099	20	
LG051	97	
63407	6	
67185	6	
70067	18	
72745	2	
75783	7	
79932	13	
82656	10	
87833	5	
90969	21	
99914	9	
ST414	64	
101880	4	
103949	60	

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>					
Part No. _____		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>		
NCR No. _____		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>		
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>		
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>			

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

Landing Gear	General	
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Picklist Print

August-22-13 7:54:47 AM

Page 2

Work Order ID: 105849

**\*105849\***

Parent Item: D212-664-201

**\*D212-664-201\***

Parent Item Name: Aft Crosstube - High

Start Date: 8/22/13

Required Date: 9/05/13

Start Qty: 1.00

Required Qty: 1.00

D2940-1

Manufactured No

230

Each

42.0000

2

2

**\*D2940-1\***

Support

\*\*

AS 13-9-1

Location

Loc Qty

Loc Code

LG

2

103115

2

LG052

40

100710

16

103951

20

71829

1

90677

2

93038

1

MS21920-28

Purchased

No

230

Each

137.0000

4

4

**\*MS21920-28\***

Ciamp

\*\*

AS 13-9-1

Location

Loc Qty

Loc Code

FG

5

105884

5

LG

1

M125728

1

LG050

120

123674

10

124505

4

125351

8

M126085

50

M126292

48

LG051

11

121440

8

123243

2

124260

1

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>			
Part No. _____		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. _____		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

Landing Gear	General	
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
<input type="checkbox"/> Heat Treat	<input type="checkbox"/> Countersink	<input type="checkbox"/> Misabeled
<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other

# Picklist Print

August-22-13 7:54:47 AM

Page 3

Work Order ID: 105849

**\*105849\***

Parent Item: D212-664-201

**\*D212-664-201\***

Parent Item Name: Aft Crosstube - High

Start Date: 8/22/13

Required Date: 9/05/13

Start Qty: 1.00

Required Qty: 1.00

D3428-1 Manufactured No

250 Each

4.0000

**\*D3428-1\***  
Placard

**\*\*** **1**

**DAS 28 9-89** 13-09-5

Location

Loc Qty

Loc Code

ST045

4

100704

4

MS21042L6 Purchased No

250 Each

357.0000

**\*MS21042L6\***  
Nut

**\*\*** **6**

**DAS 28 9-89**

Location

Loc Qty

Loc Code

ST314

357

123248

7

125535

150

m126275

200

AN960JD616 NAS1149D0663J Purchased No

250 Each

0.0000

**\*AN960JD616\***  
Washer

**\*\*** **18**

**DAS 28 9-89** 126284

AN6-40A Purchased No

250 Each

146.0000

**\*AN6-40A\***  
Bolt

**\*\*** **4**

**DAS 28 9-89**

Location

Loc Qty

Loc Code

ST340

20

M126105

20

ST517a

126

124561

1

125388

75

M126010

50

**DAS 27 9-89**

**4X**

August-22-13 7:54:47 AM

Shop Packet Print

Page 3

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____	<b>DISPOSITION</b> Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>			
Part No. _____		Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>
NCR No. _____		Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>
		Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>
		Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

**FAULT CATEGORY**

Landing Gear	General	
<input type="checkbox"/> Bending	<input type="checkbox"/> Bend	<input type="checkbox"/> Grain
<input type="checkbox"/> Centre Not Concentric to O/S	<input type="checkbox"/> BOM/Route	<input type="checkbox"/> Hardware
<input type="checkbox"/> Cracks	<input type="checkbox"/> Broken/Damaged	<input type="checkbox"/> Inspection Incomplete
<input type="checkbox"/> Crushed/Crimped	<input type="checkbox"/> Burrs	<input type="checkbox"/> Instructions Incomplete/Unclear
<input type="checkbox"/> Cuffs	<input type="checkbox"/> Contamination	<input type="checkbox"/> Maintenance
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<input type="checkbox"/> Inspection Strip in Tube	<input type="checkbox"/> Cut Too Short	<input type="checkbox"/> Misread
<input type="checkbox"/> Ripples in Bend	<input type="checkbox"/> Drill Holes	<input type="checkbox"/> Offset
<input type="checkbox"/> Torque Waves in Extrusion	<input type="checkbox"/> Drawing	<input type="checkbox"/> Out of Calibration
<input type="checkbox"/> Turning Sequence	<input type="checkbox"/> Finish	<input type="checkbox"/> Out of Sequence
<input type="checkbox"/> Wave/Twist in Tube	<input type="checkbox"/> Folio	<input type="checkbox"/> Outside Dimensions
		<input type="checkbox"/> Ovalized
		<input type="checkbox"/> Over/Under tolerance
		<input type="checkbox"/> Part Incorrect
		<input type="checkbox"/> Part Lost/Missing
		<input type="checkbox"/> Part Moved
		<input type="checkbox"/> Positioned Wrong
		<input type="checkbox"/> Power Loss/Surge
		<input type="checkbox"/> Pressure/Forced
		<input type="checkbox"/> Temperature/Cure
		<input type="checkbox"/> Weld
		<input type="checkbox"/> Wrong Stock Pulled
		<input type="checkbox"/> Other



# Picklist Print

August-22-13 7:54:47 AM

Work Order ID: 105849

\*105849\*

Parent Item: D212-664-201

\*D212-664-201\*

Parent Item Name: Aft Crosstube - High

Start Date: 8/22/13

Required Date: 9/05/13

Start Qty: 1.00

Required Qty: 1.00

AN6-41A

Purchased

No

250

Each

92.0000

**\*AN6-41A\***

Bolt

\*\* 2 2

DAS 28 13-09-5

DAS  
27  
9-89

Location

Loc Qty

Loc Code

ST504

50

M126180

50

ST517

42

125388

42

2x

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%; border: none;"> <tr> <td style="width:15%;">Skid-tube <input type="checkbox"/></td> <td style="width:15%;">Crosstube <input type="checkbox"/></td> <td style="width:15%;">Water Jet <input type="checkbox"/></td> <td style="width:15%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coor. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Doc/Data <input type="checkbox"/>									
Equip/Tooling <input type="checkbox"/>									
Operator <input type="checkbox"/>									
Material <input type="checkbox"/>									
Setup <input type="checkbox"/>									
Other <input type="checkbox"/>									
Process <input type="checkbox"/>									
Supplier <input type="checkbox"/>									
Training <input type="checkbox"/>									
Unapproved <input type="checkbox"/>									

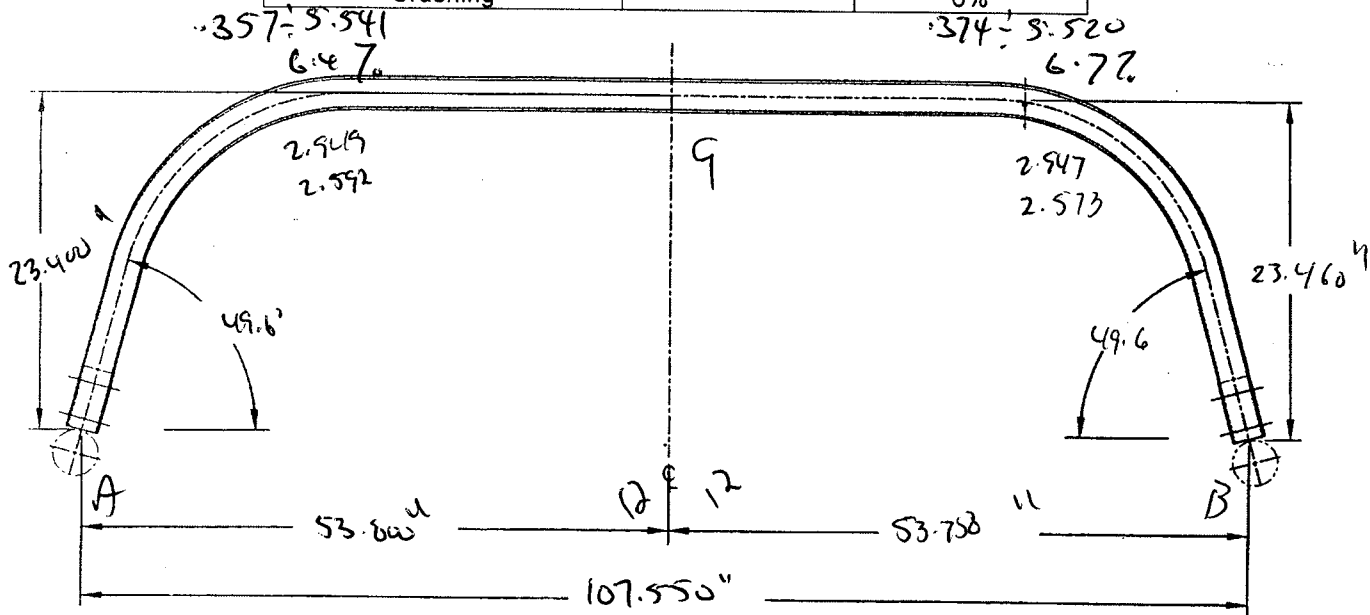
### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions
---	---	---

<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other
--	---

<b>DART AEROSPACE LTD</b>	<b>Work Order:</b> 105899
<b>Description:</b> Crosstube High Aft (205/212)	<b>Part Number:</b> D212-664-201
<b>Inspection Dwg:</b> D212-664-241 <b>Rev:</b> D	<b>Page 1 of 1</b>

Required Dimension	Min	Max
Height	24.17	24.43
1/2 Span	53.59	53.85
Angle	49	52
Total Span	107.18	107.70
Bending Passes	5	--
Crushing	--	6%



	Side A	Middle	Side B
Bending Passes	12	9	12
Crushing	6.47%		6.77%
Comments			
Side A = 6.47% crush @ 12 passes			
Middle = 9 passes			
Side B = 6.77% crush @ 12 passes			

QC15 Inspection	DAS
Date	16
	0-89 13/05/26

Rev	Date	Change	Revised by	Approved
A	07.02.06	New Issue	KJ/JM	
B	07.05.08	Dimensions updated per Dwg rev. C	KJ/JLM	
C	10.04.01	Dwg Rev updated	KJ	
D	12.04.16	Added bending, crushing dimensions	KJ	

Item	Qty -241	Qty -241B	Part Number	Description
1	X		D212-664-241	CROSSTUBE ASSEMBLY (205/212 HIGH AFT)
2		X	D212-664-241B	CROSSTUBE ASSEMBLY (214 HIGH AFT)
3	1	1	D6006-129	CROSSTUBE
4	2	2	D2940-1	SUPPORT
5	4	4	D3595-063-530	RUBBER CUSHION
6	4	4	MS21920-28	CLAMP (OR MS21920-30)
7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)

# GENERAL NOTES:

- 1) MATERIAL: MANUFACTURED FROM D6006-129  
FINISHED LENGTH = 124.362±0.020
- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2
- 3) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED.
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED.
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX.
- 6) IDENTIFICATION: SCRIBE DART PART NUMBER "D212-664-XXX" AND BATCH NUMBER ON INSIDE OF CUFF USING VIBRATING STYLUS.
- 7) WEIGHT: D212-664-241 = 44.2 lbs (PER IIN-D212-664)  
D212-664-241B = 44.2 lbs (PER IIN-D212-664)
- 8) PART IS SYMMETRIC ABOUT CENTERLINE.
- 9) RUN CUTTER OFF PART. BLEND OUT EDGE LONGITUDINALLY, TRANSITION SHOULD BE SMOOTH.
- 10) BEND PROGRESSIVELY WITH A MINIMUM OF 5 PASSES. MAXIMUM TUBE FLATTENING DUE TO BENDING IS 6% BASED ON O.D.
- 11) LIQUID PENETRANT INSPECT OUTSIDE SURFACE OF CROSSTUBE PER QSI 038.
- 12) INSTALL D2940-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2940-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 13) INSTALL MS21920-28 CLAMPS (OR -30) WITH D3595-063-530 RUBBER CUSHIONS TO SECURE THE D2940-1 SUPPORT ON TOP SIDE OF THE CROSSTUBE. ENSURE CLAMPS ARE OPPOSITE OF CROSSTUBE SUPPORT.
- 14) EXTREME CARE MUST BE TAKEN TO PROTECT THE OUTSIDE SURFACE OF THE TUBE. THE OUTSIDE SURFACE MUST BE SMOOTH AND FREE FROM SURFACE DEFECTS SUCH AS SCRATCHES, NICKS, OR DENTS. DEFECTS UP TO 0.005" MAY BE BLENDED OUT LONGITUDINALLY. CIRCUMFERENTIAL GRIND MARKS ARE UNACCEPTABLE.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

SHOP COPY  
RETURN TO  
ENGINEERING  
UNCONTROLLED COPY  
SUBJECT TO AMENDMENT  
WITHOUT NOTICE  
WORK ORDER

NO. 105849 MJS

13-08-12

600 #11-614  
11.08.26

UNDER REVIEW

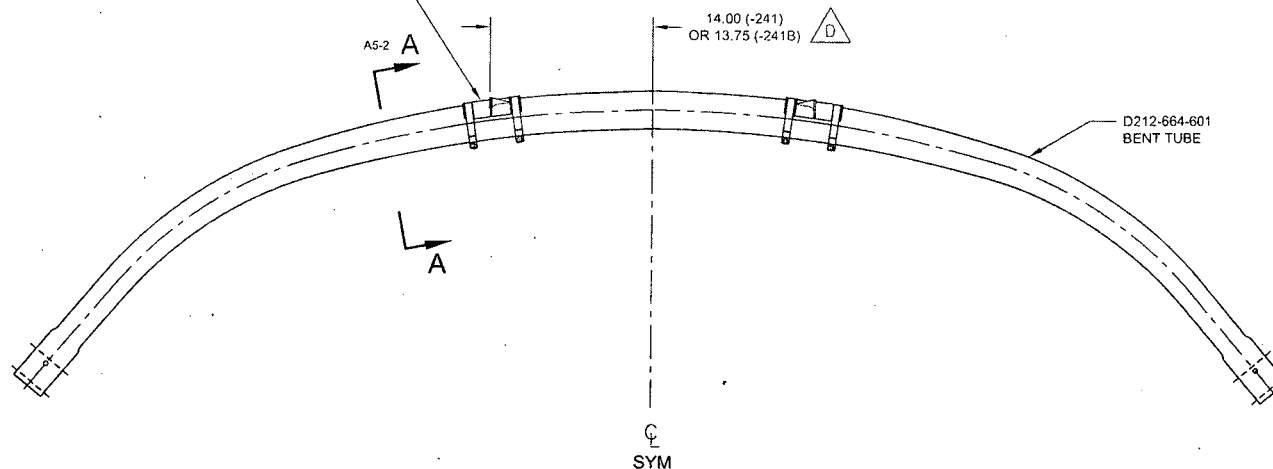
DEO ATTACHED

RELEASED  
2009-10-29

D	REFORMAT/REVISE GENERAL NOTES/PART LIST; REORGANIZED VIEWS AND REFORMATTED DRAWING TO CURRENT STANDARDS; ADD -241B (ZN D4-2, B4-2); REMOVED REF & ADD TOLERANCES (ZN D8-3 & C4-3, C6-3 & A8-3); RELOCATED FLAG #6 PER PAR 08-046 (ZN A5-3); MOVED TURNING DETAIL & UPDATED TOLERANCE TO SHEET 4	RF	09.09.30
C	REMOVE -1009 ABRASION STRIP; ADD MAGNOBOND 6398, CUSHION, REVERSE CLAMPS	PH	07.03.08
B	ADD HOLES FOR COMPATABILITY WITH BHT/AA SKIDTUBES	PH	05.02.04
A	NEW ISSUE	PH	00.12.12
REV.	DESCRIPTION	BY	DATE
DESIGN	PH	DART AEROSPACE LTD	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	PH	DRAWING NO.	REV. D
MFG. APPR.	PH	D212-664-241	SHEET 1 OF 4
APPROVED	PH	TITLE	SCALE
DE APPR.	PH	CROSSTUBE ASS'Y (205/212 HI AFT)	NTS
DATE	09.09.30	COPYRIGHT © 2005 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE REPRODUCED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.	

108849

12 13 15  
D2940-1 SUPPORT  
MS21920-28 CLAMP, 2X  
D3595-063-530 RUBBER CUSHION, 2X  
2 PL



**D212-664-241/-241B  
ASSEMBLY DETAIL**

ECO #11-614  
11.07.26  
**UNDER REVIEW**  
UP 11.06.13

**DEO ATTACHED**

**RELEASED**  
2009-10-28

12  
APPLY MAGNOBOND  
BETWEEN D2940-1 AND  
CROSSTUBE

12

D2940-1 SUPPORT, REF

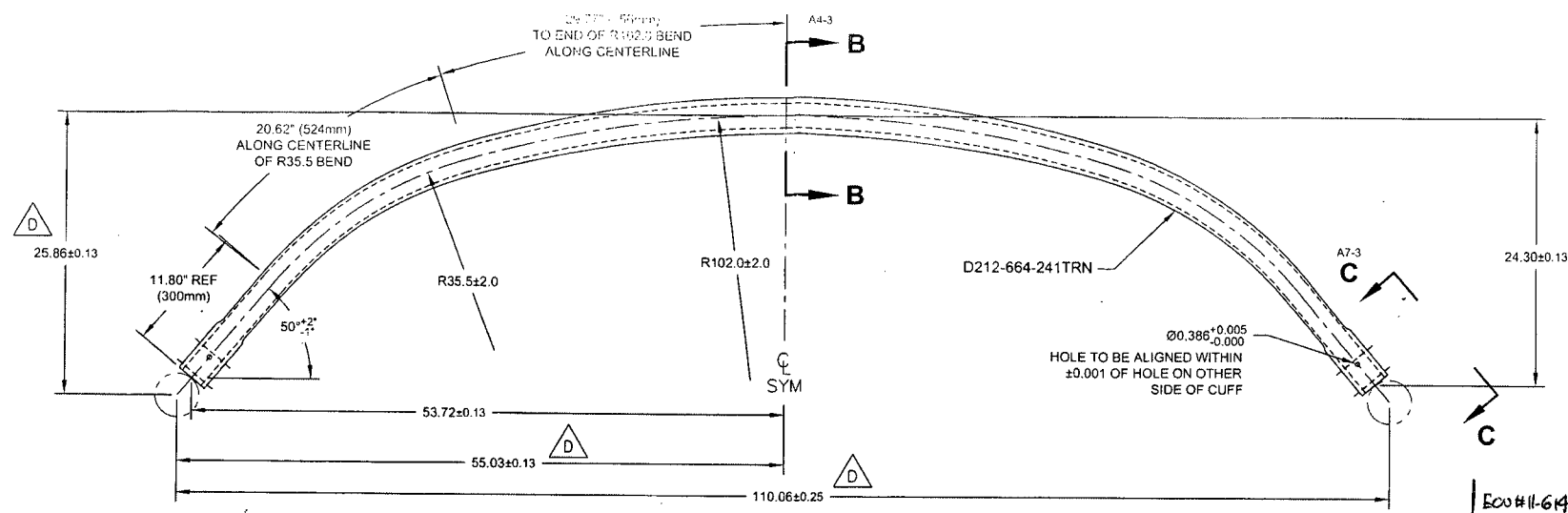
13 15  
MS21920-28  
CLAMP, REF

D3595-063-530 RUBBER CUSHION  
UNDER CLAMP, REF

**SECTION A-A** D6-2  
SCALE 4X

DESIGN	PH	<b>DART AEROSPACE LTD</b>	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	9	DRAWING NO.	REV. D
MFG. APPR.	18	D212-664-241	SHEET 2 OF 4
APPROVED	10	TITLE	SCALE
DE APPR.	14	CROSSTUBE ASS'Y (205/212 HI AFT)	NTS
DATE	09.09.30	COPYRIGHT © 2000 BY DART AEROSPACE LTD	
THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.			

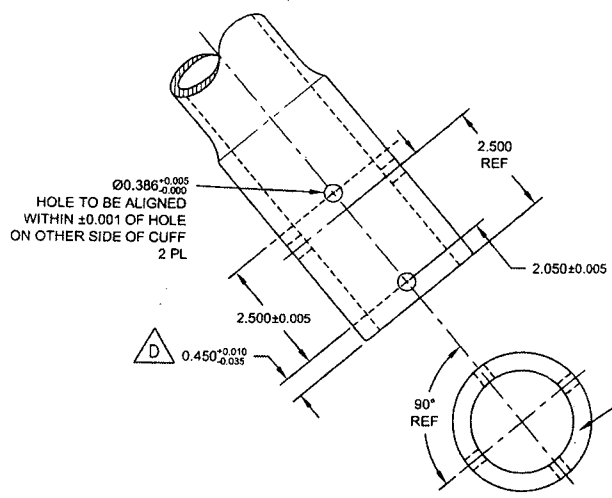
105849 704550



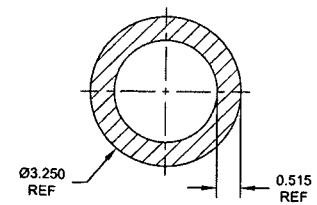
**D212-664-601** 10 D  
**BENDING AND DRILLING DETAIL**

ECO H11-614  
 16.07.26  
 UNDER REVIEW  
07/11/06 13

DEO ATTACHED  
**RELEASED**  
 2009-10-28  
*MD*



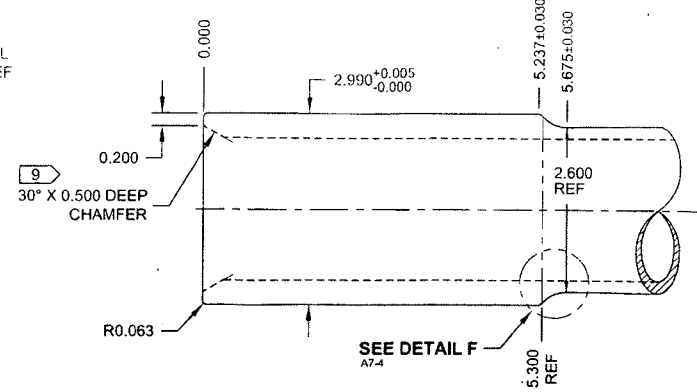
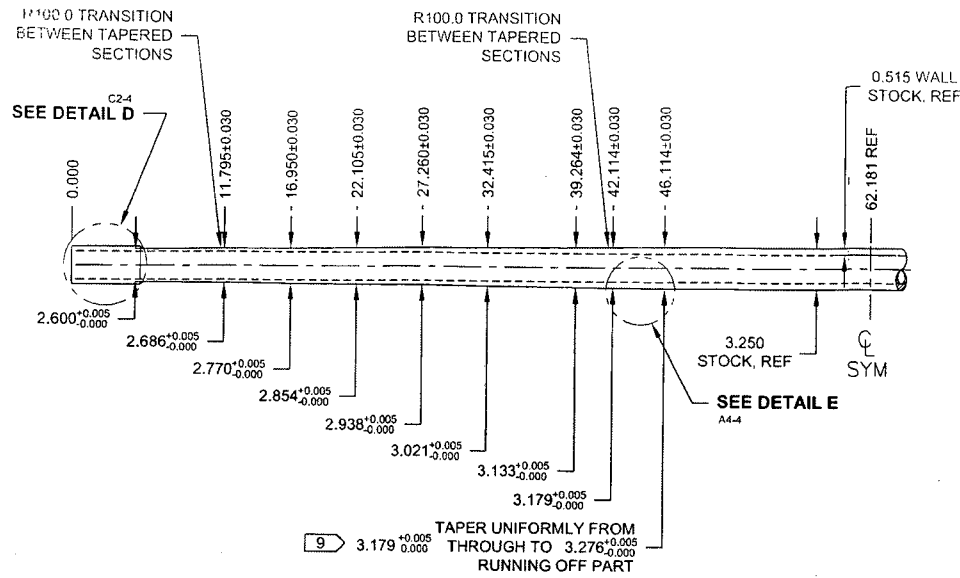
**VIEW C-C: CUFF DETAIL** D2-3  
 SCALE 3X



**SECTION B-B** D4-3  
 SCALE 4X

DESIGN	PH	<b>DART AEROSPACE LTD</b>	
DRAWN	RF	HAWKESBURY, ONTARIO, CANADA	
CHECKED	98	DRAWING NO.	REV. D
MFG. APPR.	98	D212-664-241	SHEET 3 OF 4
APPROVED	98	TITLE	SCALE
DE APPR.	98	CROSSTUBE ASSY (205/212 HI AFT)	NTS
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105849 10458



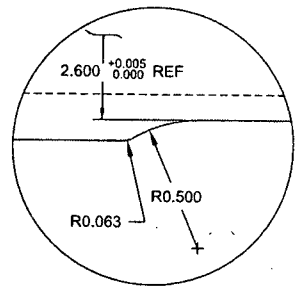
**DETAIL D:**  
**CROSSTUBE CUFF**  
SCALE 5X D8-4

200811-614  
11.07.28

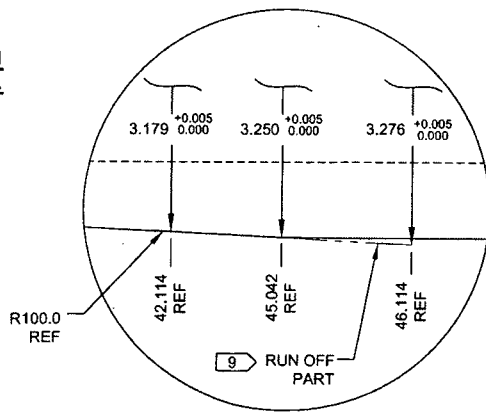
UNDER REVIEW  
9/1/08/13

DEO ATTACHED

**RELEASED**  
2009-10-29  
MAY



**DETAIL F:**  
**CUFF TRANSITION**  
SCALE 10X C2-4



**DETAIL E:**  
**TAPER RUN-OFF**  
NOT TO SCALE C5-4

DESIGN	PH	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
DRAWN	RF		
CHECKED	9	DRAWING NO.	REV. D
MFG. APPR.	18	D212-664-241	SHEET 4 OF 4
APPROVED	10	TITLE	SCALE
DE APPR.	11	CROSSTUBE ASSY (205/212 HI AFT)	NTS
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105849 107550

DRAWING NO. D212-664-241	TITLE CROSSTUBE ASSY (205/212 HI AFT)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER		D.E.O. NO. D212-664-241-D-1	SHEET NO. SHEET 1 OF 2	SCALE NTS
DRAWN	CHECKED	MFG. APPR.	APPROVED	DE APPR.			
DATE 11.04.07	DATE 11.04.11	DATE 11.04.12	DATE 11/04/12	DATE 11.04.12			

**PURPOSE:**

ADD AN INSPECTION WINDOW TO UNDERSIDE OF CROSSTUBE.

**CHANGE:**

NOTES 2 OF SHEET 1 IS AMENDED AS FOLLOWS:

**IS:**

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
MASK UNDERSIDE OF CROSSTUBE AS SHOWN (HATCHED AREA) AND  
PAINT OUTSIDE PER DART QSI 005 4.2  
REMOVE MASKING AND APPLY CLEAR COAT

**WAS:**

- 2) FINISH: CHEMICAL CONVERSION COAT PER DART QSI 005 4.1  
PRIME INSIDE AND OUTSIDE PER DART QSI 005 4.2  
PAINT OUTSIDE PER DART QSI 005 4.2

RELEASED  
2011-04-18

UNDER REVIEW

11.16.13  
ECN#1-614  
11.07.28

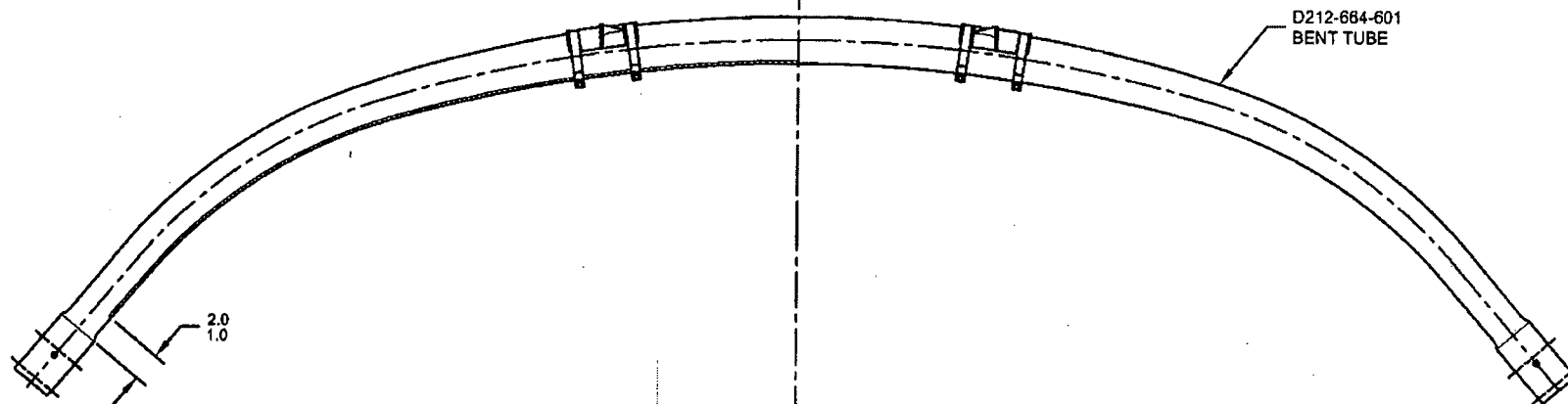


105849 624158

DRAWING NO. D212-664-241	TITLE CROSSTUBE ASSY (205/212 HI AFT)	REV. D	DART AEROSPACE LTD ENGINEERING ORDER	D.E.O. NO. D212-664-241-D-1	SHEET NO. SHEET 2 OF 2	SCALE NTS
DRAWN	CHECKED	MFG. APPR.	APPROVED	DE APPR.		
DATE 11.04.07	DATE 11.04.11	DATE 11.04.12	DATE 11/04/12	DATE 11.04.12		

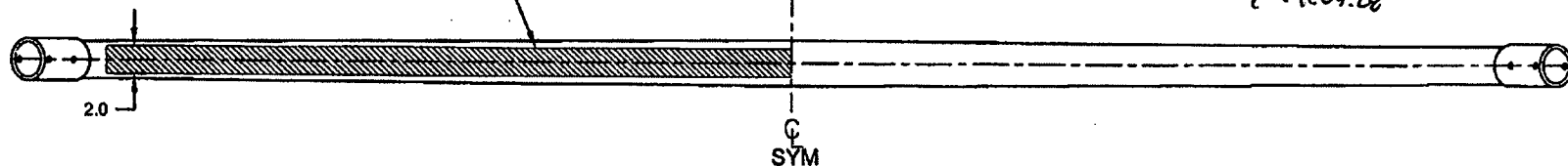
IS:

WAS:



D212-664-241/-241B  
ASSEMBLY DETAIL

MASK AREA PRIOR TO PAINTING,  
REMOVE MASKING AFTER PAINT  
AND APPLY CLEAR COAT



RELEASED  
2011-04-18

UNDER REVIEW

11.06.13  
11.07.28

105849 ~~105849~~

DRAWING NO. D212-664-241	TITLE CROSSTUBE ASS'Y (205/212 HI AFT)	REV. D	<b>DART AEROSPACE LTD ENGINEERING ORDER</b>	D.E.O. NO. D212-664-241-D-2	SHEET NO. SHEET 1 OF 1	SCALE NTS
DRAWN 92	CHECKED ASS	MFG. APPR. [Signature]	APPROVED [Signature]	DE APPR. [Signature]		
DATE 11.07.15	DATE 11.07.20	DATE 11.07.21	DATE 11/27/21	DATE 11-07-21		

**PURPOSE:**

REPLACE MAGNOBOND WITH PROSEAL.

**CHANGE:**

IS:

Item	Qty -241	Qty -241B	Part Number	Description
7	A/R	A/R	PROSEAL 890 B-2	SEALANT, AMS-S-8802 CLASS B-2

WAS:

7	A/R	A/R	MAGNOBOND 6398	ROCKWELL SPECIFICATION RBO-120-023 ADHESIVE (TEXTRON/BELL SPEC. 299-947-100, TYPE II, CLASS 2 ADHESIVE)
---	-----	-----	----------------	---

NOTE 12 & 15, SHEET 1 IS AMENDED AS FOLLOWS:

IS:

- 12) TO INSTALL D2940-1 SUPPORT: ABRASE MATING SURFACE OF SUPPORT AND CROSSTUBE WITH 180-GRIT SANDPAPER AND REMOVE RESIDUE WITH MEK (OR EQUIVALENT). APPLY A 0.04" TO 0.07" THICK LAYER OF PROSEAL 890 CLASS B-2 (OR AMS-S-8802 CLASS B-2) SEALANT TO MATING SURFACE OF SUPPORT.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING. **PRIOR TO PACKAGING, RE-CHECK TORQUE ON CLAMPS AFTER PROSEAL 890 SEALANT HAS CURED FOR 72 HOURS.**

WAS:

- 12) INSTALL D2940-1 SUPPORT USING 0.03" TO 0.06" THICK LAYER OF MAGNOBOND 6398 TO THE SURFACE OF D2940-1 THAT WILL BE IN CONTACT WITH THE CROSSTUBE PER QSI 015. LET CURE FOR 12 HOURS AFTER INSTALLATION AND PRIOR TO PACKAGING.
- 15) TORQUE CLAMPS 80 TO 100 IN-LB. ENSURE AT LEAST 1.5 THREADS SHOWING IN SAFETY AND THAT NUT HAS NOT BOTTOMED-OUT AFTER TORQUING.

**RELEASED**  
2011-07-28  
[Signature]

# DART SERVICE INSTRUCTION

TO AMEND INSTRUCTIONS FOR CONTINUOUS AIRWORTHINESS ICA-D212-664 Rev. 6 OR LATER

REF. CANADIAN STC: SH01-9  
REF. FAA STC: SR01298NY  
REF. EASA STC: EASA.IM.R.S.01304

## PURPOSE:

The supports on the following crosstubes are now installed using Proseal instead of Magnobond:

D212-664-101/-101B @ CHG 005	D212-664-201/-201B @ CHG 005
D412-664-105 @ CHG 002	D212-664-207/-207B @ CHG 002
D212-664-107/-107B @ CHG 002	

## CHANGE:

For the crosstubes listed above, section 32.4 of ICA-D212-664 is amended as follows. Use Figure 1 of this service instruction and Figures 32-2 to 32-9 of ICA-D212-664 for further reference. For crosstubes of an earlier change number, it is recommended that if the supports are removed, the supports should be reinstalled using the procedure listed below.

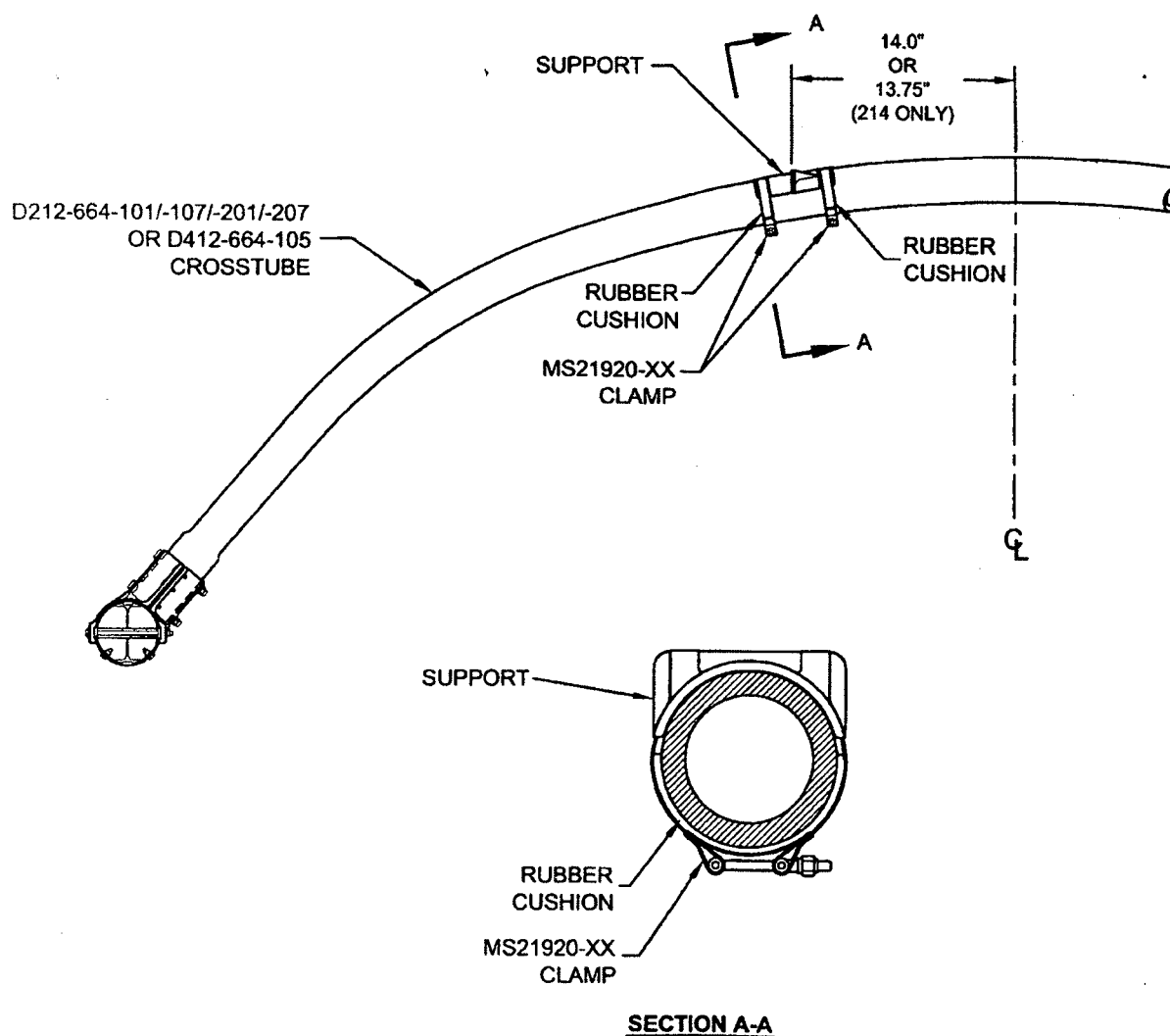
## 32.4 SUPPORT INSTALLATION

- 32.4.1 Locate the area on the crosstube for installation of support (see Figure 1 of this service instruction). For D212-664-101/-107/-201/-207 and D412-664-105 crosstubes, the outward face of the support tabs should be 14.0" (355mm) from the crosstube center for 204/205/210/412/UH-1 aircraft. For installation on 214B/B-1 aircraft, the outward face of the support tabs should be 13.75" (349mm). Ensure paint finish of crosstube is intact; touch up as required per Chapter 5 (5.3.9) of ICA-D212-664.
- 32.4.2 If present, remove any paint/primer on bottom of supports. Abrade mating surfaces of support and crosstube with 400-grit sandpaper. Saturate a clean cloth with MEK or 4105S Wash'n'Wipe Degreaser or equivalent and wipe until there is no residue.
- 32.4.3 Ensure a layer of 3M Scotch-Weld 2216 B/A Epoxy Adhesive is on the bottom of the support. If required, either apply or touch-up support to have a 0.03" to 0.05" thick layer of adhesive over the entire mating surface. Allow supports to cure for 24 hours.
- 32.4.4 Abrade mating surfaces of support (after cure) and crosstube with 180-grit sandpaper. Saturate a clean cloth with MEK or 4105S Wash'n'Wipe Degreaser or equivalent and wipe until there is no residue.
- 32.4.5 Apply a 0.04" to 0.07" thick layer of Proseal 890 Class B or AMS-S-8802 Class B sealant underneath applicable support and install support as shown in Figure 1 of this service instruction.
- 32.4.6 Install the clamps opposite to crosstube support as shown in section A-A of Figure 1. Install rubber cushions underneath each clamp around the bottom circumference of the crosstube up to the crosstube centerline. Torque clamps 80-100 in-lb (9.0-11.3 Nm). It is acceptable to use smaller or larger sized MS21920-XX clamps than those listed in ICA-D212-664, ensure that after torquing the clamps per this instruction, the nuts are in safety but not bottomed out
- 32.4.7 Prior to installing crosstube on aircraft, allow supports to cure for 72 hours and recheck torque on clamps.

CANADA	
DEPARTMENT OF TRANSPORT	
AIRCRAFT CERTIFICATION	
BRANCH	
DAO # 01-O-01	
APPROVED	
BY:	<i>[Signature]</i>
D. SHEPHERD (DE # 02)	
DATE:	11.07.20
CERT. NO.:	SH01-9
ISSUE NO.:	3

B	ADD 3M 2216 ADHESIVE TO SUPPORT	CP	11.07.15
A	NEW ISSUE	CP	11.06.14
REV.	DESCRIPTION	BY	DATE
DESIGN	<i>AP</i>	DART AEROSPACE LTD	
DRAWN	<i>AP</i>	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>ASS</i>	DRAWING NO.	REV. B
MFG. APPR.	<i>N/A</i>	DSI 9563	SHEET 1 OF 2
APPROVED	<i>[Signature]</i>	TITLE	SCALE
DE APPR.	<i>[Signature]</i>	SUPPORT INSTALLATION CHANGE	NTS
DATE	11.07.15	COPYRIGHT © 2011 BY DART AEROSPACE LTD	
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105846



**FIGURE 1: SUPPORT INSTALLATION**

CANADA  
DEPARTMENT OF TRANSPORT  
AIRCRAFT CERTIFICATION  
BRANCH  
DAO # 01-O-01

APPROVED

BY: *[Signature]*  
D. SHEPHERD (DE # 02)

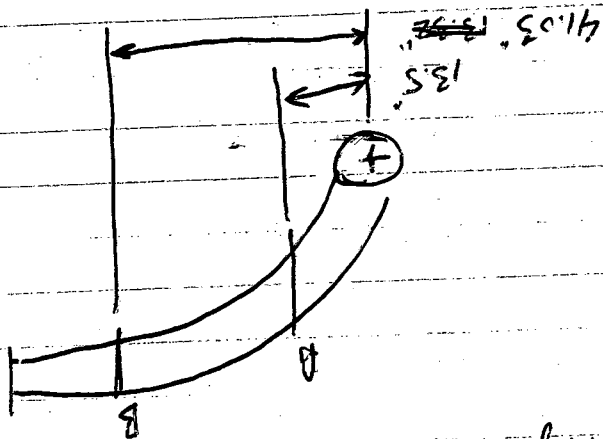
DATE: 11.07.20  
CERT. NO.: SH01-9  
ISSUE NO.: 3

DESIGN	00	<b>DART AEROSPACE LTD</b>	
DRAWN	00	HAWKESBURY, ONTARIO, CANADA	
CHECKED	ASS	DRAWING NO.	REV. B
MFG. APPR.	N/A	DSI 9563	SHEET 2 OF 2
APPROVED	<i>[Signature]</i>	TITLE	SCALE
DE APPR.	<i>[Signature]</i>	SUPPORT INSTALLATION CHANGE	NTS
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4854  
40418

CRUSHING OF D212-664-201

Acceptability of 8% CRUSHING



Point A:  $OD = 2.548$  in  $OD = 2.492$  in  
 CRUSHING  $(2.992 - 2.548) / (2.992 + 2.548) = 8\%$   
 $I = 1.476$  in<sup>4</sup>

Point B:  $OD = 3.25$  in  $ID = 2.22$  in  
 $I = 4.284$  in<sup>4</sup>

A:  $F = M/L/I = P \times 13.5 \times 2.548 / 2 \times 1.476 = 11.65P$   
 B:  $= P \times 41.03 \times 2.992 / 2 \times 4.284 = 14.32P$

$MS = 14.32 / 11.65 - 1 = 0.22$

The will fail of support before area of 8% CRUSHING, 8% CRUSHING AT END OF BEAM IS ACCEPTABLE

$\phi 12.1221$





## LIQUID PENETRANT TEST REPORT

P- 15347

CLIENT	<u>DART Aerospace</u>	DATE	<u>August 28/13</u>	PAGE	<u>1</u>	OF	<u>1</u>
ATTENTION	<u>ANDY SKELDON</u>	ACUREN JOB NO.	<u>180 - 13 - CO 166</u>	TIME	AM <input checked="" type="checkbox"/>	PM <input type="checkbox"/>	
ADDRESS	<u>1270 ABELDEEN ST.</u>	PO/VO No.	<u>- 21144 SMD</u>				
	<u>HAWKESBURY, ON.</u>	WORK LOCATION	<u>SAME</u>				
PROJECT	<u>F.P.I. on CROSSMBS</u>	ACCEPTANCE STD.	<u>BSM 1417/05-038</u>	REV./DATE	<u>2005</u>		
ITEM(S) EXAMINED	<u>(2)</u>						

JOB DESCRIPTION	PROCEDURE NO. <u>LT 002</u>	REV./DATE <u>2008</u>	TECHNIQUE NO. <u>LT 002</u>	REV./DATE <u>2008</u>
PART NO.	<u>SEE RESULTS</u>	MATERIAL <u>Aluminum</u>	THICKNESS <u>VARIOUS</u>	
SCOPE	<u>A WET FLOWESCENT DYE EXAMINATION WAS COMPLETED ON THE SURFACE ONLY.</u>			

TEST DETAILS					
METHOD	<input checked="" type="checkbox"/> FLUORESCENT	<input type="checkbox"/> VISIBLE	<input checked="" type="checkbox"/> WATER WASH	<input type="checkbox"/> SOLVENT REMOVABLE	<input type="checkbox"/> POST EMULSIFIED
FAMILY BRAND	<u>MAGNAFLUX</u>		BLACK LIGHT S/N <u>10459</u>	<input type="checkbox"/> OUTPUT > 1000 $\mu$ W/cm <sup>2</sup>	<input type="checkbox"/> AMBIENT < 2 fc
PENETRANT	<u>2LG7</u>	MINIMUM DWELL TIME <u>45</u> MIN.	LIGHTING EQUIP. <input type="checkbox"/> FLASHLIGHT <input type="checkbox"/> TROUBLELIGHT	<input type="checkbox"/> OUTPUT > 100 fc @ SURFACE	
PENETRANT REMOVER	<u>H2O</u>	MINIMUM DRY TIME <u>&gt;10</u> MIN.	OTHER <u>LASER</u>		
DEVELOPER	<u>SKD 52</u>	MINIMUM DWELL TIME <u>10</u> MIN.	LIGHT METER S/N	CAL DUE DATE	
DEVELOPER TYPE	<input checked="" type="checkbox"/> NON AQUEOUS	<input type="checkbox"/> AQUEOUS	<input type="checkbox"/> DRY		

TEST SURFACE					
SURFACE CONDITION	<input type="checkbox"/> AS GROUND	<input type="checkbox"/> AS WELDED	<input checked="" type="checkbox"/> MACHINED	<input type="checkbox"/> SHOT BLASTED	<input checked="" type="checkbox"/> CLEAN BARE METAL
SURFACE TEMPERATURE	<input type="checkbox"/> < - 4°C/ 20°F	<input type="checkbox"/> - 4°C/ 20°F TO 10°C/50°F	<input checked="" type="checkbox"/> 10°C/50°F TO 52°C/125°F	<input type="checkbox"/> > 52°C/125°F	

RESULTS- ( <input type="checkbox"/> METRIC <input type="checkbox"/> IMPERIAL)			
COMMENTS			
CROSSMBS			
1	"	105849	/
1	"	105872	/
1	"	105872	/
1	"	105155	/
1	"	105154	/
1	"	105912	/
1	"	105911	/
1	"	105157	/
LEFLAND (1) TIME.			

Scope of Services  
The agreement of Acuren Group Inc. to perform services extends only to those services provided for in writing. Under no circumstances shall such services extend beyond the performance of the requested services. It is expressly understood that all descriptions, comments and expressions of opinion reflect the opinions or observations of Acuren Group Inc. based on information and assumptions supplied by the owner/operator and are not intended nor can they be construed as representations or warranties. Acuren Group Inc. is not assuming any responsibilities of the owner/operator and the owner/operator retains complete responsibility for the engineering, manufacture, repair and use decisions as a result of the data or other information provided by Acuren Group Inc. In no event shall Acuren Group Inc.'s liability in respect of the services referred to herein exceed the amount paid for such services.

Standard of Care  
In performing the services provided, Acuren Group Inc. uses the degree, care and skill ordinarily exercised under similar circumstances by others performing such services in the same or similar locality. No other warranty, expressed or implied, is made or intended by Acuren Group Inc.

SIGNATURES		
CLIENT REPRESENTATIVE	<u>Andy Skeldon</u>	DTR # <u>E-20323</u>
TECHNICIAN (SIGNATURE):	<u>Mike L. H. S.</u>	REPORT REVIEWED BY:
NAME (PRINT):	<u>Mike L. H. S.</u>	NAME INITIALS
CGSB LEVEL	1 <sup>ST</sup> TECHNICIAN	2 <sup>ND</sup> TECHNICIAN
CGSB REG. No	<u>6606</u>	